

<b>COMBINED DECLARATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)</b>			Attorney Docket No.: <b>54720-8027.US00</b>		
<p>As a below named inventor, I hereby declare that:</p> <p>My residence, post office address and citizenship are as stated below next to my name,</p> <p>I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:</p> <p style="text-align: center;"><b>MULTI-DIMENSIONAL CHROMATOGRAPHY SYSTEM FOR PROTEOMICS</b></p> <p>the specification of which (check only one item below):</p> <p><input checked="" type="checkbox"/> is attached hereto.</p> <p><input type="checkbox"/> was filed as United States application Serial No. * on *</p> <p>I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.</p> <p>I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR §1.56(a).</p> <p>I hereby claim foreign priority benefits under 35 U.S.C. §119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate or 365(a) of any PCT international application(s) which designated at least one country other than the United States of America listed below and have also identified below, by checking the box, any foreign application(s) for patent or inventor's certificate, or of any PCT international application(s) having a filing date before that of the application(s) on which priority is claimed</p>					
<b>PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. §119:</b>					
<b>COUNTRY (if PCT, indicate "PCT")</b>	<b>APPLICATION NUMBER</b>	<b>DATE OF FILING (day, month, year)</b>	<b>PRIORITY CLAIMED UNDER 35 USC §119</b>		
<b>GB</b>	<b>0221469.0</b>	<b>16 September 2002</b>	<input checked="" type="checkbox"/> <b>YES</b>	<input type="checkbox"/> <b>NO</b>	
<p>I hereby claim the benefit under 35 U.S.C. §120 of any United States application(s) or 365(c) of any PCT international application(s) designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT application(s) in the manner provided by the first paragraph of 35, U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR §1.56(a) which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application.</p>					
<b>PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. §120:</b>					
<b>U.S. APPLICATIONS</b>			<b>STATUS (Check one)</b>		
U.S. APPLICATION NUMBER	U.S. FILING DATE	PATENTED	PENDING	ABANDONED	
<b>60/403,909</b>	<b>16 August 2002</b>			<b>X</b>	
<b>PCT APPLICATIONS DESIGNATING THE U.S.</b>					
PCT APPLICATION NO.	PCT FILING DATE	U.S. Serial Nos. Assigned (if any)			
<b>PCT/US03/25367</b>	<b>13 August 2003</b>			<b>X</b>	
<p><b>POWER OF ATTORNEY:</b> As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:</p> <p><b>All attorneys associated with Customer No. 22918, affiliated with Perkins Coie LLP.</b></p>					

<b>COMBINED DECLARATION AND POWER OF ATTORNEY (CONTINUED)</b> <b>(Includes Reference to PCT International Applications)</b>			<b>Attorney Docket No.:</b> <b><u>54720-8027.US00</u></b>
<b>Send Correspondence to:</b>		Perkins Coie LLP P.O. Box 2168 Menlo Park, CA 94026  Customer No. 22918	<b>Direct Telephone Calls to:</b> Jacqueline F. Mahoney (650) 838-4410
<b>FULL NAME OF INVENTOR 1</b>	<b>FAMILY NAME</b> <b>BAUSSANT</b>	<b>FIRST GIVEN NAME</b> <b>Thierry</b>	<b>SECOND GIVEN NAME</b>
<b>RESIDENCE &amp; CITIZENSHIP</b>	<b>CITY</b> <b>Meyrin/GE</b>	<b>STATE OR FOREIGN COUNTRY</b> <b>Switzerland</b>	<b>COUNTRY OF CITIZENSHIP</b> <b>FR</b>
<b>POST OFFICE ADDRESS</b>	<b>POST OFFICE ADDRESS</b> <b>2, Pre-de-la Fontaine</b>	<b>CITY</b> <b>1217 Meyrin/GE</b>	<b>STATE &amp; ZIP CODE/COUNTRY</b> <b>CH</b>
<b>FULL NAME OF INVENTOR 2</b>	<b>FAMILY NAME</b> <b>BOEHM</b>	<b>FIRST GIVEN NAME</b> <b>Guenther</b>	<b>SECOND GIVEN NAME</b>
<b>RESIDENCE &amp; CITIZENSHIP</b>	<b>CITY</b> <b>Meyrin/GE</b>	<b>STATE OR FOREIGN COUNTRY</b> <b>Switzerland</b>	<b>COUNTRY OF CITIZENSHIP</b> <b>DE</b>
<b>POST OFFICE ADDRESS</b>	<b>POST OFFICE ADDRESS</b> <b>2, Pre-de-la Fontaine</b>	<b>CITY</b> <b>1217 Meyrin/GE</b>	<b>STATE &amp; ZIP CODE/COUNTRY</b> <b>CH</b>
<b>FULL NAME OF INVENTOR 3</b>	<b>FAMILY NAME</b> <b>HELLER</b>	<b>FIRST GIVEN NAME</b> <b>Manfred</b>	<b>SECOND GIVEN NAME</b>
<b>RESIDENCE &amp; CITIZENSHIP</b>	<b>CITY</b> <b>Meyrin/GE</b>	<b>STATE OR FOREIGN COUNTRY</b> <b>Switzerland</b>	<b>COUNTRY OF CITIZENSHIP</b> <b>CH</b>
<b>POST OFFICE ADDRESS</b>	<b>POST OFFICE ADDRESS</b> <b>2, Pre-de-la Fontaine</b>	<b>CITY</b> <b>1217 Meyrin/GE</b>	<b>STATE &amp; ZIP CODE/COUNTRY</b> <b>CH</b>
<b>FULL NAME OF INVENTOR 4</b>	<b>FAMILY NAME</b> <b>KUSSMANN</b>	<b>FIRST GIVEN NAME</b> <b>Martin</b>	<b>SECOND GIVEN NAME</b>
<b>RESIDENCE &amp; CITIZENSHIP</b>	<b>CITY</b> <b>Meyrin/GE</b>	<b>STATE OR FOREIGN COUNTRY</b> <b>Switzerland</b>	<b>COUNTRY OF CITIZENSHIP</b> <b>DE</b>
<b>POST OFFICE ADDRESS</b>	<b>POST OFFICE ADDRESS</b> <b>2, Pre-de-la Fontaine</b>	<b>CITY</b> <b>1217 Meyrin/GE</b>	<b>STATE &amp; ZIP CODE/COUNTRY</b> <b>CH</b>
<b>FULL NAME OF INVENTOR 5</b>	<b>FAMILY NAME</b> <b>MENIN</b>	<b>FIRST GIVEN NAME</b> <b>Laure</b>	<b>SECOND GIVEN NAME</b>
<b>RESIDENCE &amp; CITIZENSHIP</b>	<b>CITY</b> <b>Meyrin/GE</b>	<b>STATE OR FOREIGN COUNTRY</b> <b>Switzerland</b>	<b>COUNTRY OF CITIZENSHIP</b> <b>FR</b>
<b>POST OFFICE ADDRESS</b>	<b>POST OFFICE ADDRESS</b> <b>2, Pre-de-la Fontaine</b>	<b>CITY</b> <b>1217 Meyrin/GE</b>	<b>STATE &amp; ZIP CODE/COUNTRY</b> <b>CH</b>
<b>FULL NAME OF INVENTOR 6</b>	<b>FAMILY NAME</b> <b>ROGERS</b>	<b>FIRST GIVEN NAME</b> <b>John</b>	<b>SECOND GIVEN NAME</b> <b>W.</b>
<b>RESIDENCE &amp; CITIZENSHIP</b>	<b>CITY</b> <b>Meyrin/GE</b>	<b>STATE OR FOREIGN COUNTRY</b> <b>Switzerland</b>	<b>COUNTRY OF CITIZENSHIP</b> <b>FR</b>
<b>POST OFFICE ADDRESS</b>	<b>POST OFFICE ADDRESS</b> <b>2, Pre-de-la Fontaine</b>	<b>CITY</b> <b>1217 Meyrin/GE</b>	<b>STATE &amp; ZIP CODE/COUNTRY</b> <b>CH</b>

<b>FULL NAME OF INVENTOR 7</b>	<b>FAMILY NAME</b> <b>ROSE</b>	<b>FIRST GIVEN NAME</b> <b>Keith</b>	<b>SECOND GIVEN NAME</b>
<b>RESIDENCE &amp; CITIZENSHIP</b>	<b>CITY</b> <b>Meyrin/GE</b>	<b>STATE OR FOREIGN COUNTRY</b> <b>Switzerland</b>	<b>COUNTRY OF CITIZENSHIP</b> <b>UK</b>
<b>POST OFFICE ADDRESS</b>	<b>POST OFFICE ADDRESS</b> <b>2, Pre-de-la Fontaine</b>	<b>CITY</b> <b>1217 Meyrin/GE</b>	<b>STATE &amp; ZIP CODE/COUNTRY</b> <b>CH</b>

  

<b>SIGNATURE OF INVENTOR 1</b>	
_____	_____
Date	Signature
<b>SIGNATURE OF INVENTOR 2</b>	
_____	_____
Date	Signature
<b>SIGNATURE OF INVENTOR 3</b>	
_____	_____
Date	Signature
<b>SIGNATURE OF INVENTOR 4</b>	
_____	_____
Date	Signature
<b>SIGNATURE OF INVENTOR 5</b>	
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Date	Signature
<b>SIGNATURE OF INVENTOR 6</b>	
_____	_____
Date	Signature
<b>SIGNATURE OF INVENTOR 7</b>	
_____	_____
Date	Signature